

MENASHA HEALTH DEPARTMENT - RESTAURANT / RETAIL FOOD SERVICE INSPECTION REPORT

Business Name Aspen Coffee and Tea		Business Address 1110 Midway Road		County Winnebago		ID # 22-24052	
Legal Licensee Aspen Coffee and Tea, LLC		Mailing Address (Licensee) same		Telephone # (920) 751-3888			
Date of inspection 10/25/13		Bare Hand Contact Plan in Place <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Type of Establishment <input type="checkbox"/> Restaurant <input checked="" type="checkbox"/> Retail <input type="checkbox"/> School <input type="checkbox"/> Liq lic		Is operator Certified <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> pending <input type="checkbox"/> N/A	
Inspection Type <input type="checkbox"/> pre-inspection <input checked="" type="checkbox"/> routine inspection <input type="checkbox"/> Re-inspection <input type="checkbox"/> Complaint <input type="checkbox"/> Downtime <input type="checkbox"/> Non inspection visit				Action Taken <input checked="" type="checkbox"/> Operational <input type="checkbox"/> Conditional Permit 30 days <input type="checkbox"/> Withhold Permit <input type="checkbox"/> License suspended <input type="checkbox"/> License revoked <input type="checkbox"/> Other			
Person in Charge Gail Woulf				CFM # and expiration CFM # expiration date			
FOODBORNE ILLNESS RISK FACTORS							
Circle designated compliance status for each item IN -in compliance OUT – out of compliance N/O – not observed N/A – not applicable				Mark an X in appropriate box for COS and/or R COS – corrected on site during inspection R - repeat violation			

COMPLIANCE STATUS			COS	R	COMPLIANCE STATUS			COS	R
DEMONSTRATION OF KNOWLEDGE					POTENTIALLY HAZARDOUS FOOD TEMPERATURE				
1A	IN	Certified food manager, duties	<input type="checkbox"/>	<input type="checkbox"/>	16	NO	Proper cooking time and temperature	<input type="checkbox"/>	<input type="checkbox"/>
1B	IN	Person in charge, ID knowledgeable, duties and responsibilities	<input type="checkbox"/>	<input type="checkbox"/>	17	IN	Proper re-heating procedures for hot holding	<input type="checkbox"/>	<input type="checkbox"/>
EMPLOYEE HEALTH					CONSUMER ADVISORY				
2	IN	Management awareness, policy present	<input type="checkbox"/>	<input type="checkbox"/>	18	NO	Proper cooling time and temperature	<input type="checkbox"/>	<input type="checkbox"/>
3	IN	Proper use of reporting, restriction and exclusion	<input type="checkbox"/>	<input type="checkbox"/>	19	NO	Proper hot holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>
GOOD HYGENIC PRATICES					HIGHLY SUSEPTABLE POPULATIONS				
4	OUT	Proper eating, tasting, drinking	<input checked="" type="checkbox"/>	<input type="checkbox"/>	20	IN	Proper cold holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>
5	IN	No discharge from eyes, nose and mouth	<input type="checkbox"/>	<input type="checkbox"/>	21	IN	Proper date marking and disposition	<input type="checkbox"/>	<input type="checkbox"/>
PREVENTING CONTAMINATION FROM HANDS					22	NA	Time as a public health control; procedures and record	<input type="checkbox"/>	<input type="checkbox"/>
6	IN	Hands cleaned and properly washed	<input type="checkbox"/>	<input type="checkbox"/>	CHEMICAL				
7	IN	No bare hand contact or using approved plan	<input type="checkbox"/>	<input type="checkbox"/>	23	NA	Consumer advisory supplied	<input type="checkbox"/>	<input type="checkbox"/>
8	OUT	Adequate hand washing facilities supplied and accessible	<input checked="" type="checkbox"/>	<input type="checkbox"/>	CONFORMANCE WITH APPROVED PROCEDURES				
APPROVED SOURCE					24	NA	Pasteurized foods used; prohibited foods not offered	<input type="checkbox"/>	<input type="checkbox"/>
9	IN	Food obtained from approved source	<input type="checkbox"/>	<input type="checkbox"/>	Risk Factors: are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health interventions are control measures to prevent foodborne illness or injury.				
10	NO	Food received at proper temperature	<input type="checkbox"/>	<input type="checkbox"/>	Risk factor violations should be corrected on site during the inspection unless there is some reason that correction cannot be immediately made.				
11	IN	Food in good condition, safe, unadulterated	<input type="checkbox"/>	<input type="checkbox"/>	25	NA	Food additives approved and properly use	<input type="checkbox"/>	<input type="checkbox"/>
12	NA	Records available, shell stock tags, parasite destruction	<input type="checkbox"/>	<input type="checkbox"/>	26	IN	Toxic substances properly identified, stored, used	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PROTECTION FROM CONTAMINATION					CONFORMANCE WITH APPROVED PROCEDURES				
13	IN	Food separated and protected	<input type="checkbox"/>	<input type="checkbox"/>	27	NA	Compliance with variance, specialized process, HACCP plan	<input type="checkbox"/>	<input type="checkbox"/>
14	OUT	Food contact surfaces cleaned and sanitized	<input type="checkbox"/>	<input type="checkbox"/>	Risk Factors: are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health interventions are control measures to prevent foodborne illness or injury.				
15	IN	Proper disposition of returned, previously served, reconditioned & unsafe food	<input type="checkbox"/>	<input type="checkbox"/>	Risk factor violations should be corrected on site during the inspection unless there is some reason that correction cannot be immediately made.				

GOOD RETAIL PRACTICES									
Good retail practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into food. Mark an X in box if item is not in compliance. Mark an X in appropriate box for COS/R. COS – corrected on site during inspection R - repeat violation									
SAFE FOOD AND WATER			COS	R	PROPER USE OF UTENSILS				
28	NA	Pasteurized eggs used where required	<input type="checkbox"/>	<input type="checkbox"/>	41	IN	In use utensils properly stored	<input type="checkbox"/>	<input type="checkbox"/>
29	IN	Water and ice from approved source	<input type="checkbox"/>	<input type="checkbox"/>	42	OUT	Utensils equipment and linen properly stored and used	<input type="checkbox"/>	<input type="checkbox"/>
30	NA	Variance obtained for specialized processing methods	<input type="checkbox"/>	<input type="checkbox"/>	43	IN	Single-use and Single service articles properly stored and used	<input type="checkbox"/>	<input type="checkbox"/>
FOOD TEMPERATURE CONTROL					44	IN	Gloves properly used	<input type="checkbox"/>	<input type="checkbox"/>
31	IN	Proper cooling methods used; adequate equip. for temperature control.	<input type="checkbox"/>	<input type="checkbox"/>	UTENSILS AND EQUIPMENT				
32	NO	Plant food properly cooked for hot holding	<input type="checkbox"/>	<input type="checkbox"/>	45	IN	Food and nonfood contact surfaces; cleanable, properly designed, constructed and used	<input type="checkbox"/>	<input type="checkbox"/>
33	IN	Approved thawing methods used.	<input type="checkbox"/>	<input type="checkbox"/>	46	IN	Warewash facilities; installed, maintained, and used	<input type="checkbox"/>	<input type="checkbox"/>
34	OUT	Thermometers provided and accurate	<input type="checkbox"/>	<input type="checkbox"/>	47	OUT	Non-food contact surfaces clean	<input type="checkbox"/>	<input type="checkbox"/>
FOOD PROTECTION					PHYSICAL FACILITIES				
35	IN	Food properly labeled original container	<input type="checkbox"/>	<input type="checkbox"/>	48	IN	Hot and cold water available, under pressure	<input type="checkbox"/>	<input type="checkbox"/>
36	IN	Pests and animals not present, no unauthorized persons	<input type="checkbox"/>	<input type="checkbox"/>	49	IN	Plumbing installed; proper backflow devices	<input type="checkbox"/>	<input type="checkbox"/>
37	IN	Contamination prevented during food preparation storage and display	<input type="checkbox"/>	<input type="checkbox"/>	50	IN	Sewage and wastewater properly disposed	<input type="checkbox"/>	<input type="checkbox"/>
38	OUT	Personal cleanliness, jewelry	<input type="checkbox"/>	<input type="checkbox"/>	51	IN	Toilet facilities, properly constructed, supplied and clean	<input type="checkbox"/>	<input type="checkbox"/>
39	IN	Wiping cloths; properly used and stored	<input type="checkbox"/>	<input type="checkbox"/>	52	IN	Garbage and refuse, properly disposed facilities and maintained	<input type="checkbox"/>	<input type="checkbox"/>
40	NO	Plant food cooking for hot hold Washing all fruits and vegetables	<input type="checkbox"/>	<input type="checkbox"/>	53	OUT	Physical facilities installed maintained and clean	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	54	IN	Adequate ventilation and lighting, designed and used.	<input type="checkbox"/>	<input type="checkbox"/>

Menu Review:
Review Conducted
☒ yes
☐ no
- New menu items
☐ Yes
☒ No
New items

New processes:
Does new process require variance
☐yes
☐ no

What interim step was taken pending variance

Addition to Consumer Advisory
☐ yes
☐ no
New menu item which requires consumer advisory

Concerns / Corrections Suggested:

TEMPERATURES – Refrigeration/hot hold/cook					
Item / Location	Temp	Item / Location	Temp	Item / Location	Temp
upright refrigerator coffee section	41°F	prep cooler coffee	37°F	hot hold coffee section in process of reheating 15 min.	89°F
upright refrigerator bakery	36°F	upright refrigerator bakery	38°F	--	° F
Cook --	°F	Cook --	° F	Cook --	° F
WAREWASHING INFORMATION					
Machine Name	Sanitization Method	Thermo Label confirmed	PPM/ temp	Sanitizer Name / Approved Y/N	Sanitizer Type
Pro Power	sanitizing machine	<input type="checkbox"/> yes <input type="checkbox"/> No	50ppm / 118 °F rinse	chlorine <input type="checkbox"/> Yes <input type="checkbox"/> No	chlorine

CDC Risk Code Factor Abbreviations and Violation by Category Numbers Table

(Use this table to group CDC risk factor listed below with violation from page 1)

Unsafe Sources (US)	Inadequate Cooking (IC)	Improper Hold (IH)	Cross Contamination (CC)	Personal Hygiene (PH)	Other CDC Factors (O)
9	16	18	13	3	1A
10	17	19	14	4	1B
11		20	15	5	2
12		21		6	23
		22		7	24
				8	25
					26

For each violation cited, use above table and record CDC Risk Code Factor abbreviation (such as “US” or “IH”), violation number, list from the Wisconsin Food Code (WFC) the reference number that refers to the area in violation.

Record CDC risk code abbreviation, violation # from 1st page, violation description, Food Code reference, corrective action, and score.

CDC Code	Violation number P- Priority Pf- Priority Foundation	Description of violation, WFC Reference Number including code reference text / Corrective Action Required – Note date(s) of repeat violations on previous inspections.	Compliance Date/ Corrected on site (COS)
PH	4 <input type="checkbox"/> P <input checked="" type="checkbox"/> Pf <input type="checkbox"/> C	<p>Bakery Section - Noted partially eaten muffin and beverage container placed on rack directly above clean cutting board in storage. Food employee acknowledged food was hers. Risk is the potential transmission of saliva to food contact surface. .</p> <p>WISCONSIN FOOD CODE REFERENCE 2-401.11 Eating, Drinking, or Using Tobacco. (A) Except as specified in ¶ (B) of this section, an EMPLOYEE shall eat, drink, or use any form of tobacco only in designated areas where the contamination of exposed FOOD; clean EQUIPMENT, UTENSILS, and LINENS; unwrapped SINGLE-SERVICE and SINGLE-USE ARTICLES; or other items needing protection cannot result.</p> <p>CORRECTIVE ACTION All employee eating and drinking must be done in a designated area away from food and food contact surfaces. Cutting board was ordered was ordered rewashed and sanitized due to possible contamination.</p>	COS

PH	8 <input type="checkbox"/> P <input checked="" type="checkbox"/> Pf <input type="checkbox"/> C	<p>No disposable hand towels were noted at the Bakery area hand wash sink. .</p> <p>WISCONSIN FOOD CODE REFERENCE 6-301.12 Hand Drying Provision.</p> <p>Each HANDWASHING SINK or group of adjacent HANDWASHING SINKS shall be provided with:</p> <p>(A) Individual, disposable towels; Pf (B) A continuous towel system that supplies the user with a clean towel; Pf or (C) A heated-air hand drying device; Pf or (D) A hand drying device that employs an air-knife system that delivers high velocity, pressurized air at ambient temperatures. Pf</p> <p>CORRECTIVE ACTION Disposable towels must be available at the hand sink.</p>	COS
CC	14 <input type="checkbox"/> P <input type="checkbox"/> Pf <input checked="" type="checkbox"/> C	<p>Bakery Section - Build-up noted around the interior ridge and walls of the ice bin. .</p> <p>WISCONSIN FOOD CODE REFERENCE 4-602.11 Equipment Food-Contact Surfaces and Utensils.</p> <p>(A) EQUIPMENT FOOD-CONTACT SURFACES and UTENSILS shall be cleaned:</p> <p>(4) In EQUIPMENT such as ice bins and BEVERAGE dispensing nozzles and enclosed components of EQUIPMENT such as ice makers, cooking oil storage tanks and distribution lines, BEVERAGE and syrup dispensing lines or tubes, coffee bean grinders, and water vending EQUIPMENT:</p> <p>(a) At a frequency specified by the manufacturer, or (b) Absent manufacturer specifications, at a frequency necessary to preclude accumulation of soil or mold.</p> <p>CORRECTIVE ACTION Ice bin should be drained and completely cleaned and sanitized. Refer to manufacturer's recommendations.</p>	72 hours

Use this section for Good Retail Practice (GRP) Violations

Violation #	Description of violation, WFC Reference Number / Corrective Action Required	Compliance Date/ Corrected during inspection
34 <input type="checkbox"/> P <input checked="" type="checkbox"/> Pf <input type="checkbox"/> C	<p>Thermometer in the Coffee Shop milk cooler was noted fluctuating 10F on digital reading. No additional thermometer was noted in the cooler.</p> <p>WISCONSIN FOOD CODE REFERENCE 4-204.112 Temperature Measuring Devices.</p> <p>(A) In a mechanically refrigerated or hot FOOD storage unit, the sensor of a TEMPERATURE MEASURING DEVICE shall be located to measure the air temperature or a simulated product temperature in the warmest part of a mechanically refrigerated unit and in the coolest part of a hot FOOD storage unit.</p> <p>CORRECTIVE ACTION A thermometer should be placed in the warmest portion of the cooler. The digital thermometer should not be used to monitor refrigeration temperature. If refrigeration temperatures continue to fluctuate around 41F refrigeration unit should be serviced immediately.</p>	72 hours

38 <input type="checkbox"/> P <input type="checkbox"/> Pf <input checked="" type="checkbox"/> C	<p>Both areas - Food employees noted working directly with food without effective hair restraint.</p> <p>WISCONSIN FOOD CODE REFERENCE 2-402.11 Effectiveness. (A) Except as provided in ¶ (B) of this section, FOOD EMPLOYEES shall wear hair restraints such as hats, hair coverings or nets, beard restraints, and clothing that covers body hair, that are designed and worn to effectively keep their hair from contacting exposed FOOD; clean EQUIPMENT, UTENSILS, and LINENS; and unwrapped SINGLE-SERVICE and SINGLE-USE ARTICLES. (B) <i>This section does not apply to FOOD EMPLOYEES such as counter staff who only serve BEVERAGES and wrapped or PACKAGED FOODS, hostesses, and wait staff if they present a minimal RISK of contaminating exposed FOOD; clean EQUIPMENT, UTENSILS, and LINENS; and unwrapped SINGLE-SERVICE and SINGLE-USE ARTICLES.</i></p> <p>CORRECTIVE ACTION Employees working directly with food or food contact equipment must wear effective hair restraint such as hair nets or ball caps.</p>	
42 <input type="checkbox"/> P <input type="checkbox"/> Pf <input checked="" type="checkbox"/> C	<p>Bakery Area - Forks noted in container being dispensed with food contact side up. Single use containers also noted stored in the same area with food contact surface exposed.</p> <p>WISCONSIN FOOD CODE REFERENCE 4-904.11 Kitchenware and Tableware. (A) SINGLE-SERVICE and SINGLE-USE ARTICLES and cleaned and SANITIZED UTENSILS shall be handled, displayed, and dispensed so that contamination of FOOD- and lip-contact surfaces is prevented. (B) Knives, forks, and spoons that are not prewrapped shall be presented so that only the handles are touched by EMPLOYEES and by CONSUMERS if CONSUMER self-service is provided. (C) Except as specified under ¶ (B) of this section, SINGLE-SERVICE ARTICLES that are intended for FOOD- or lip-contact shall be furnished for CONSUMER self-service with the original individual wrapper intact or from an APPROVED dispenser.</p> <p>CORRECTIVE ACTION Dispense silverware with handles exposed to prevent contamination of food contact surface. Invert single use containers to protect food contact surface.</p>	COS
45 <input type="checkbox"/> P <input type="checkbox"/> Pf <input checked="" type="checkbox"/> C	<p>Bakery Area - Counter edge at the drive thru window noted with exposed wood which is not a cleanable surface. This counter is used for food prep and would routinely have food spills requiring cleaning</p> <p>WISCONSIN FOOD CODE REFERENCE 4-202.16 Nonfood-Contact Surfaces. NonFOOD-CONTACT SURFACES shall be free of unnecessary ledges, projections, and crevices, and designed and constructed to allow easy cleaning and to facilitate maintenance</p> <p>CORRECTIVE ACTION Edging should be reinstalled on this counter edge or edge painted with gloss cleanable paint to provide a cleanable surfaces or counter should be replaced with cleanable materials which is smooth impervious and easily cleanable.</p>	30 days
53 <input type="checkbox"/> P <input type="checkbox"/> Pf <input checked="" type="checkbox"/> C	<p>Coffee Area - Wall adjacent to the prep cooler is damaged and not cleanable in current condition.</p> <p>WISCONSIN FOOD CODE REFERENCE 6-101.11 Surface Characteristics. (A) Except as specified in ¶ (B) of this section, materials for indoor floor, wall, and ceiling surfaces under conditions of normal use shall be: (1) SMOOTH, durable, and EASILY CLEANABLE for areas where FOOD ESTABLISHMENT operations are conducted;</p> <p>CORRECTIVE ACTION Wall surface must be repaired to provide a cleanable surface. Recommend installing a fiber or PVC board section in this area immediately adjacent to the prep cooler which would provide a more durable and washable surface.</p>	30 days

Long term controls in place

Critical Violations which require greater than one re-inspection and/or repeated CDC Risk Factors violation(s) which are cited on 3 consecutive inspections shall result in the issuance of a re-inspection fee. Re-inspection fees are set based on the complexity of the establishment as follows:

- **Complex restaurants** \$250.00
- **Moderate restaurants** \$200.00
- **Simple restaurants** \$150.00
- **Retail >1 M** \$300.00
- **Retail 25K-1M** \$250.00
- **Retail remaining** \$200.00

Violations must be corrected by the compliance date, unless some arrangement has been made with Menasha Health Department. Re-inspection fees will be assessed to all CDC Risk Factor violations requiring more than (1) re-inspection or if the same CDC Risk Factor violation is cited on 3 consecutive inspections. Re-inspection fees will be billed to the owner of the establishment. Failure to pay re-inspection fee shall result in the following potential legal actions:

- **Temporary revocation of license**
- **License will not be renewed pending payment**
- **Enforcement conference with licensee or licensee representative which would require signed compliance agreement.**

Operators who wish to challenge the assessment of a re-inspection fee shall submit in writing circumstances and reason that they feel the re-inspection fee should not have been assessed. This statement must be submitted to the Public Health Director. The issue will then be addressed by the City of Menasha Board of Health. Any violations and /or enforcement shall be complied with pending appeal.

The City of Menasha posts all Health Department Inspection reports on the City of Menasha Web-Site.

Inspection Narrative and information on non-violation observations and/or suggestions:

I understand and agree to comply with the corrections ordered in this report. I understand the failure to comply could result in legal action including loss of license.

PIC signature or authorized employee	Date	Sanitarian Signature Todd Drew, R.S.	Date

Food Safety Fact Sheets Attached:

<input type="checkbox"/> Employee Health	<input type="checkbox"/> Employee Reporting Agreement	<input type="checkbox"/> Personal Hygiene	<input type="checkbox"/> Bare hand contact
<input type="checkbox"/> Responsibilities of the PIC	<input type="checkbox"/> Disposable glove use	<input type="checkbox"/> Cross – Contamination	<input type="checkbox"/> Demonstration of Knowledge
<input type="checkbox"/> Cooling Procedures	<input type="checkbox"/> Thawing Procedures	<input type="checkbox"/> Active Managerial Control	<input type="checkbox"/> Certified Food Manager
<input type="checkbox"/> Consumer Advisory	<input type="checkbox"/> HACCP	<input type="checkbox"/> HACCP Hazard Analysis	<input type="checkbox"/> Serving Safe Food
<input type="checkbox"/> Pre-Inspection	<input type="checkbox"/> Time as a Health Control	<input type="checkbox"/> Allergens	<input type="checkbox"/> Thermometer Calibration
<input type="checkbox"/> Catering	<input type="checkbox"/> Cooking Temperatures	<input type="checkbox"/> Microwave Cooking	<input type="checkbox"/> Interpreting the Inspection Report
<input type="checkbox"/> Variance / HACCP	<input type="checkbox"/> Frozen Foods	<input type="checkbox"/> Receiving	<input type="checkbox"/> Chemical / Physical Contamination
<input type="checkbox"/> Common Foodborne Illnesses	<input type="checkbox"/> Outdoor Events	<input type="checkbox"/> Serving Safe Food	<input type="checkbox"/> Effective Sanitizing
<input type="checkbox"/> Organizing Coolers	<input type="checkbox"/> Date Marking		

